Only

PAGE 1 / 4 •

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 × COMMITTEE (in full) is changed) over the lines. America Unlimited 5745 Southwest 75th Street ADDRESS (number and street) #283 (Check if address is changed) Gainesville 32608 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS laura@tedyoho.com (Check if address is changed) Optional Second E-Mail Address csyoho@cox.net COMMITTEE'S WEB PAGE ADDRESS (URL) americaunlimited.com (Check if address is changed) DATE 20 2015 C00567180 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Laura Jackson Type or Print Name of Treasurer Laura Jackson [Electronically Filed] 07 20 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

ı	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	didate	Committee:	
(a)	닏	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Name Cand	e of lidate		
	lidate ⁄ Affiliatio	Office on Sought: House Senate President	State
(c)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name	e of	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Cand			
Pari	ty Com	nmittee:	Domooratio
(d)			Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
America Unlimited	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraisin	ng Representative, or Leadership PAC Sponsor
THEODORE SCOTT MR. YOHO	
8209 SW 95TH LANE	
Mailing Address	
GAINESVILLE	FL 32608 STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fun	draising Representative X Leadership PAC Sponsor
<ol> <li>Custodian of Records: Identify by name, address (phone number optional) are books and records.</li> </ol>	nd position of the person in possession of committee
Laura Jackson	
Full Name 8209 Southwest 95th Lane	
Mailing Address	
Gainesville	FL 32608
Title or Position CITY	STATE ZIP CODE
treasurer Telepho	one number 352 - 226 - 1107
8. <b>Treasurer:</b> List the name and address (phone number optional) of the treasurer any designated agent (e.g., assistant treasurer).	er of the committee; and the name and address of
Full Name Laura Jackson of Treasurer	
Mailing Address   8209 Southwest 95th Lane	
Gainesville 	STATE ZIP CODE
Title or Position , treasurer	one number 352 - 226 - 1107

FEC <b>Form</b>	<b>1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
g - 1201000		
	CITY STATE Z	IP CODE
Title or Position		
Danks or Other	Depositioning, List all house or other depositioning to which the committee deposit 6 of 1 days	accounts rents
safety deposit bo Name of Bank, [	SunTrust Bank	accounts, rents
safety deposit bo	oxes or maintains funds.  Depository, etc.	
safety deposit bo Name of Bank, [	Depository, etc.  SunTrust Bank	
safety deposit bo Name of Bank, [	SunTrust Bank  14220 West Newberry Road  Gainesvile  FL 32669	ZIP CODE
safety deposit bo Name of Bank, [	SunTrust Bank  14220 West Newberry Road  Gainesvile  CITY  STATE  Z	
safety deposit bo Name of Bank, [ Mailing Address	SunTrust Bank  14220 West Newberry Road  Gainesvile  CITY  STATE  Z	
safety deposit bo Name of Bank, [ Mailing Address	SunTrust Bank  14220 West Newberry Road  Gainesvile  CITY  STATE  Z	
Name of Bank, I	SunTrust Bank  14220 West Newberry Road  Gainesvile  CITY  STATE  Z	
Name of Bank, I	SunTrust Bank  14220 West Newberry Road  Gainesvile  CITY  STATE  Z	